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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/656,915
	Filing Date	September 7, 2000
	First Named Inventor	Benowitz, L.I.
	Group Art Unit	1614
	Examiner Name	To be assigned
Total Number of Pages in This Submission	Attorney Docket Number	701039-052260

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Form PTO-1449; References marked AA, CA and CB; Certificate of Mailing; Return Receipt Postcard.
Remarks The Commissioner is authorized to charge fee deficiencies to the NIXON PEABODY LLP deposit account 50-0850.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	David S. Resnick (Reg.No. 34,235) NIXON PEABODY LLP, 101 Federal Street, Boston, MA 02110
Signature	
Date	12/27/02

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 12/27/02			
Typed or printed name	Melissa Kruggel		
Signature		Date	12/27/02

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Docket No. 701039-052260

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE JAN 03 2003

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Applicants: Benowitz, L.I.

Serial No.: 09/656,915

Group: 1614

Filed: September 7, 2000

Examiner: To be assigned

For: METHODS AND COMPOSITIONS FOR MODULATING AXONAL GROWTH
OF CENTRAL NERVOUS SYSTEM NEURONS

Assistant Commissioner for Patents
Washington, D.C. 20231

CERTIFICATE OF MAILING

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Date: 12/27/02

Melissa Kruggel

Sir:

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

In accordance with the provisions of 37 C.F.R. §§1.56 and 1.97, Applicants herewith submit the publications and/or patents shown on the attached form PTO-1449, for consideration by the Examiner in connection with the examination of the above-identified patent application.

REMARKS

In accordance with the provisions of 37 C.F.R. §1.97, this statement is being filed:

- X (1) within three (3) months of the Filing Date or **before the mailing date of the First Office Action** on the merits; or
- (2) within three months of the mailing date of the PCT International Search Report; or
- (3) after the period defined in (1) but before the mailing date of a **Final Rejection or Notice of Allowance**, and the requisite Certification or fee under Rule 1.17(p), namely **\$240.00**, is included herein; or

- (4) after the mailing date of a **Final Rejection** or **Notice of Allowance** but before the payment of the **Issue Fee**, and the requisite Certification, petition, and petition fee are included herein.

It is respectfully requested that each of the documents shown on the attached form(s) PTO-1449 be made of record in this application. Copies of these documents (CHECK ONE):

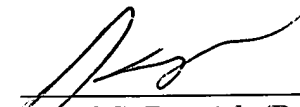
- X are enclosed herewith; and
 have been cited in the parent application, and are thus not being resubmitted herein.
 A copy of the International Search Report from its corresponding PCT application is also enclosed herewith.

Early examination and allowance of the present application are respectfully solicited.

FEE AUTHORIZATION

Should any fees associated with the submission be required, the Commissioner is authorized to charge the missing fee to our Deposit Account No. 50-0850. Any overpayments should be credited to said Deposit Account.

Respectfully submitted,



David S. Resnick (Reg. 34,235)
NIXON PEABODY LLP
101 Federal Street
Boston, MA 02110
(617) 345-6057

Date: 12/27/02



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Sheet 1 of 3

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FORM PTO-1449			DOCKET NO.: 052260		SERIAL NO.: 09/656,915		
INFORMATION DISCLOSURE STATEMENT			APPLICANT(S): Benowitz, L.I.				
			FILING DATE: 9/7/00		GROUP NO.: 1614		
UNITED STATES PATENT DOCUMENTS							
EXAM. INITIALS		DOCUMENT NUMBER	DATE	INVENTOR/ASSIGNEE	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE
FOREIGN PATENT DOCUMENTS							
		DOCUMENT NUMBER	DATE	COUNTRY	CLASS	SUBCLASS	TRANSLATION YES/NO
	AA	WO 99/11274	11 March 1999	PCT			
OTHER DOCUMENTS (INCLUDING AUTHOR, TITLE, DATE, PERTINENT PAGES, ETC.)							
	CA	Rowland-Gagné, et al., (1990), <i>Jour. of Neuro.</i> , Vol. 54, No. 2, 424-433					
	CB	Volonté, Cinzia, (1993), <i>Neuro. Letters</i> , 159, 119-122					



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Assistant Commissioner for Patents
Washington, D.C. 20231

on 12/27/02
Date

Mel Kruggel
Signature

Melissa Kruggel
Typed or printed name of person of signing Certificate

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Information Disclosure Statement with attached Form PTO-1449 (3 pp);
References marked AA, CA and CB;
Transmittal Form (PTO/SB/21)(1 pg);
Certificate of Mailing (1 pg.); and
Return Receipt Postcard.